

POSITION	INITIALS	IC NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER		48	4/27/01
FORMALITY REVIEW	8d	557	5/7/01
RESPONSE FORMALITY REVIEW	Request	925	08-16-01

### INDEX OF CLAIMS

✓ ..... Rejected  
 = ..... Allowed  
 - (Through numeral)..... Canceled  
 + ..... Restricted  
 N ..... Non-elected  
 I ..... Interference  
 A ..... Appeal  
 O ..... Objected

Claim	Date
Final	
Original	
1	8/22
2	11/02
3	5/02
4	11/03
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Claim	Date
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If more than 150 claims or 10 actions  
staple additional sheet here

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**BEST AVAILABLE COPY**

8/10/01  
 8/16/01